

<b>Frances</b> <b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Received by (Please Print Clearly) <i>Erik Lang</i> B. Date of Delivery _____</p> <p>C. Signature <i>Erik Lang</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below:</p> <p><i>UNIFUND CCR PARTNERS 10625 Techwoods Circle CINCINNATI, OHIO 45242</i></p> <p>3. Service Type <i>USPS</i></p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p>7004 1160 0003 5801 0181</p>	
2. Article Number (Copy from service label)			
PS Form 3811, July 1999		Domestic Return Receipt	
		102595-00-M-0952	